The objective of the FRANZCOG Curriculum is to equip future specialists with the knowledge, skills and professional qualities appropriate to the healthcare needs of women in two countries that comprise culturally diverse populations. The FRANZCOG Curriculum, and the training program that it underpins, is responsive to a constantly changing

approach to implementing those changes ensures minimal disruption to trainees who are part of the way through their training, and maximum certainty and educational effectiveness for all trainees.

Competency is achieved through an incremental process of learning and development, so the Curriculum indicates ways in which learning might be promoted in the key areas of Clinical Expertise, Academic Abilities and Professional Qualities. Consultants who supervise the training of future medical specialists are crucial to this process, in guiding day-to-day learning and ensuring robust growth of the profession.

The Curriculum also specifies assessment formats appropriate to articulated objectives. Importantly, the Curriculum is a dynamic document requiring ongoing review and evaluation of both the educational plan and its implementation.

The original FRANZCOG Curriculum acknowledged that it drew liberally on Skills for the New Millennium, a competency framework outlined in the CanMEDS 2000 Project Societal Needs Working Group Report, and accepted by The Royal College of Physicians and Surgeons of Canada as the desired future direction of postgraduate medical education in Canada at that time. CanMEDS has, of course, gained wide acceptance since that time, undergoing review and

	Basic Training			
	1 Year Basic Training time	2 Years Basic Training time	3 Years Basic Training time	4 Years Basic Training time
Workshops & Learning Resources	eLearning@RANZCOG modules (eLM)			

RANZCOG acknowledges that the education of medical specialists can no longer be managed totally within the day-to-day experiences of hospital activity. An interpretation that relies solely on the expectation that the public hospital system is able to provide the scope of experience necessary to attain proficiency across the range of domains now associated with competence in specialty practice is limited. Traditional hospital-based training needs to be enhanced by the inclusion of well-designed supportive programs, as well experience in alternative training settings.

Nevertheless, enhanced apprenticeship continues to be viewed by the College as an appropriate description of a model that integrates the learning available in a teaching hospital with other structured educational opportunities involving, for example, workshops, short courses and databases of learning resources.

This section outlines the framework for the educational objectives of the FRANZCOG Curriculum. It describes the skills, attributes and key competencies considered necessary for effective specialist practice within three domains:

Clinical expertise (CE)
Academic abilities and (AA)
Professional qualities (PQ)s

Specialist obstetricians and gynaecologists possess a defined body of knowledge and procedural skills that are used to select and interpret information, make appropriate clinical decisions regarding management of a patient and carry out diagnostic and therapeutic procedures within the boundaries of their discipline and expertise.

Their care is characterised by up-to-date, ethical, cost-effective practice and effective partnerships with a patient and her support group, specialist colleagues and other healthcare professionals.

Specialist obstetricians and gynaecologists know that excellent communication skills are fundamental to their day-to-day functioning, in eliciting and conveying information and establishing a therapeutic partnership with women in their care.

Particularly, obstetricians and gynaecologists recognise that effective communication with a patient and her support group can enhance the therapeutic relationship as well as influence the manifestations and outcome of her healthcare situation.

3.1.1 Demonstrate medical expertise in core areas of obstetric and gynaecological care		**B.1 Obstetrics** **B.2 Gynaecology**
	demonstrate advanced abilities in clinical reasoning and judgement and an ability to manage clinical situations **recognise current limits of medical expertise** **customise care according to the individual needs and wishes of women in their care, taking into account their personal beliefs, experiences, and social, economic and cultural background**	**B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgis B.c.06(2.1)**

3.1.2 Demonstrate medical expertise in core areas of surgical procedure and care	management of equipment used in operative O & G knowledge and application of specific procedures, including risk reduction strategies management of operative complications	**B.3 General Surgical Principles** **B.3 General Surgical Principles**
3.1.3 Demonstrate medical expertise in one or more advanced areas of obstetric and gynaecological care	**Advanced areas of O & G care include:** **a. Advanced general O & G** **b. Subspecialisation** **- Gynaecological oncology** **- Maternal fetal medicine** **- Obstetric and gynaecological ultrasound** **- Reproductive endocrinology and infertility** **- Urogynaecology** **c. Sexual and Reproductive Health** **d. Academic practice in O & G**	**B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles** **As specified in ATMs and subspecialty programs**
3.1.4 Demonstrate effective communication	obtain and synthesise relevant history discuss appropriate information to prepare patients for unfamiliar situations plan and evaluated patient care and facilitate decision making	**B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles** **A.1.10 Research Skills**
	discuss appropriate information regarding patients evaluate management approaches and provide options for ongoing collaborative care of the patient	**B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles**
	using a vocabulary that dignifies women and their healthcare in a courteous and helpful manner discussing history and management issues in ways that respect and empower women in their care, considering their personal beliefs, experiences, and social, economic and cultural background Principles	

		B.1 Obstetrics **B.2 Gynaecology** **B.3 General Surgical Principles** **B.4 Research Skills**
	an understanding of relevant local, national and international guidelines that are based on contemporary and historical evidence **the application of appropriate qualitative and quantitative research tools and methods** **the contributions that evidence has to the development of new knowledge, understanding and practices**	**A.1 Epidemiology and Research Methods** **A.1.10 Research Skills**
	maintain up-to-date knowledge and practices **be flexible in terms of changes in career paths**	
3.2.2 Teach and communicate effectively	**be trained (and assessed as competent) in teaching skills**	

Specialist obstetricians and gynaecologists function as managers, team workers and health advocates, with high standards of ethical conduct and a commitment to the best interests of the patient. Their practice is in the settings of individual patient care, practice organisations and healthcare systems.

Specialist practitioners require effective management skills in making decisions, allocating resources and recognising risks. They acknowledge the worth of each member of the health service team, recognising that effective healthcare is the result of professionals working together with the knowledge and resources available to them.

The societal expectation is that specialists dedicate their distinct body of knowledge, skills and professional qualities

3.3.3 **Solicit and accept constructive feedback on practice**	[redacted]	

		A.1.10 Research Skills **B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles** **C.2 Ethics** **A.1.10 Research Skills** **B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles** **C.2 Ethics**
3.3.5 **Show commitment to the best interests of the patient and the profession**	**acknowledging patient and family rights** **advocating on behalf of patients with special needs** **allocating finite health resources prudently** **recognising and respecting cultural diversity and promoting cross cultural understanding** **identifying the important determinants of health and well-being of women and their babies** **using time and resources to balance patient care, learning needs and lifestyle**	**& Cultural Issues** **C.4 Management & Professional Skills** **B.1 Obstetrics** **B.2 Gynaecology** **B.3 General Surgical Principles** **A.1.10 Research Skills**
	an effective College member and contributor and recognises the need **an advocate for appropriate resourcing of healthcare for women** **health**	**C.4 Management & Professional Skills**

This section details areas of knowledge and underlying principles that underpin the practice of obstetrics and gynaecology. Understanding of these principles will develop with regular clinical experience, for it is the interaction between knowledge and practice that provides the basis for growth in clinical expertise.

The areas of knowledge presented in sections 4 are categorised as follows:

- Scientific and medical knowledge that forms the building blocks underpinning clinical practice and research.

- Clinical knowledge and management skills required in obstetric and gynaecological care.

- Contextual knowledge of ethics, cultural attitudes and the law that acknowledges the service obligations implicit in the practice of obstetrics and gynaecology.

Relevant knowledge may be accessed in a variety of ways, through text books, refereed articles in journals and book series, evidence-based electronic databases and publications, academic discourse, conference papers and many informal means of communication. Many of these are detailed in the on-line ACQUIRE modules, accessed through the RANZCOG web site.

It is through these publications and interact -21.00385(ons that)4.01917((con)4.9271[snsus con)4.99733(st(an)4.00566(ardsd i)-0.79

LB = logbook

WE = Written Examination

OE = Oral Examination

TSR = Training Supervisor Reports

APSS = Assessment of Procedural and Surgical Skills

RP = Research Project

Understand statistical terms including:

- **Quantitative variables (discrete and continuous)**
- **Qualitative variables (categorical)**

Understand summary statistics including:

- **Measurements of central tendency: mean, median and mode**
- **Symmetric (parametric) and asymmetric (non-parametric) frequency distributions**
- **Measures of dispersion or variability: range and standard deviation**
- **Standard error and confidence intervals**
- **Hypothesis testing and level of significance**

Know the different statistical tests used for data analysis

Search literature and data bases purposefully including: Medline, Embase, Cochrane Database of Systematic Reviews RANZCOG Landmark Trials Understand "study types" in relation to study objectives including: Experimental: RCT Observational: cohort, case-control, cross-sectional analytical Meta-analysis Know different levels of evidence Recognise and understand sources of bias affecting study outcomes re: Selection Measurement Confounding Interpret results meaningfully with consideration for: Appropriate summary statistics used including confidence intervals Sample size Know how to select and draw on clinical evidence to inform practice.	WS(R)	WE
Understand and apply the following:	eLM ST WS(R)	

Be able to:

- Use electronic databases such as Medline and the Internet to conduct literature searches and to locate information.
- Use word processors, databases, spreadsheets and statistical packages to produce statistical analyses and research papers.
- Conduct a literature review.
- Develop an hypothesis to be tested.
- Choose an appropriate research methodology and design a research study.
- Apply for ethics committee approval for a clinical or laboratory based study.
- Collect, collate and interpret data.
- Apply basic statistical analysis to clinical data.
- Develop an outline structure for a research paper.

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Learning Outcomes:

Demonstrate knowledge and understanding of:

physiology associated with normal growth and development of the placenta, fetus and neonate and deviations from this (AA 3.2.1.3)

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

Understand physiological responses and changes to birth including: **Initiation of respiration** **Heart rate and circulation** **Thermoregulation** **Barometric homeostasis**	**eLM** **ST** **HEP** **WS(FSEP)**	**WE** **OE** **TSR**

Learning Outcomes:

Demonstrate knowledge and understanding of:

*** Refer to page**

Learning Outcomes:

Demonstrate knowledge and understanding of genetics relevant to (AA 3.2.1.3):

normal growth and development of the fetus and neonate and deviations from this

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

Have a basic understanding of: **The structure and function of DNA the process of mitosis and meiotic segregation of chromosomes** **Describe** **the nature, fertility implications and risks associated with aneuploidy, chromosomal translocations, duplications and deletions** **Be familiar with:** **The fetal and postnatal phenotype associated with trisomy 21, trisomy 18, trisomy 13, monosomy, X (Turner syndrome), sex chromosomes, aneuploidies and triploidy**	**eLM** **eLM**	**WE** **OE** **TSR** **APSS** **WE** **OE** **TSR**
Understand the common patterns of inheritance, the associated risks of transmission or recurrence and common conditions of each type: **Autosomal dominant inheritance; for example Marfan syndrome** **Autosomal recessive inheritance; for example, thalassemia, cystic fibrosis** **X-linked inheritance; for example Fragile X**	**eLM** **ST** **HEP**	**WE** **OE** **TSR**

Understand the principles, techniques of, and indications for prenatal screening, including:

- **First and second trimester screening for trisomy 21, 18 and 13, and neural tube defects**
- **Free fetal DNA assessment of fetal conditions**
- **The use of ultrasound and another non-invasive methods for screening/diagnosis for trisomies 21, 18 and 13**
-

Have a basic understanding of the information obtained with prenatal diagnostic testing from: **Fluorescent in-situ hybridisation (FISH), standard karyotyping by g-banding, microarray analysis** **Understand the principles and indications for pre-implantation genetic diagnosis, including:** **PGD for chromosomal or single gene disorders** **Understand the principles and methodology for newborn screening for genetic conditions including:** **Common conditions tested in Australia and New Zealand** **Have a basic understanding of** **Inherited breast and ovarian cancer syndromes**	**eLM** **ST** **HEP**	**WE** **OE** **TSR**

Learning Outcomes:

Demonstrate knowledge and understanding of pharmacology and therapeutics relevant to (AA 3.2.1.3):

normal growth and development of the fetus and neonate and deviations from this

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

Learning Outcomes:

Demonstrate knowledge and understanding of clinical imaging relevant to (AA 3.2.1.3):

normal growth and development of the fetus and neonate and deviations from this

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

Learning Outcomes:

Demonstrate knowledge and understanding of pathology and haematology relevant to (AA 3.2.1.3):

Be able to describe the haematological changes in normal pregnancy and in pregnancy complications, including but not limited to:

Learning Outcomes:

Demonstrate knowledge and understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of the following medical and surgical conditions, including (AA 3.2.1.3):

- **the condition, its effects and any necessary therapy during pregnancy**

• Acute and chronic glomerulonephritis, chronic renal disease, dialysis, acute and chronic renal failure, pregnancy after renal transplant • Lupus nephropathy • Pyelonephritis (acute and chronic), urinary tract infections • Haematuria • Renal and ureteric calculi, hydronephrosis and hydroureter	eLM ST HEP	WE OE TSR
• Oral cavity disease • Appendicitis, the acute abdomen, reflux oesophagitis, peptic and duodenal ulcer, biliary tract disease, pancreatitis • Gastrointestinal bleeding, splenic rupture and aneurism, haemorrhoids • Inflammatory bowel disease, irritable bowel disease, mal-absorption, constipation • Infective gastroenteritis • Hyperemesis	eLM ST HEP	WE OE TSR

- Appropriate diet and weight gain in pregnancy
-

Asthma, chronic lung disease, including cystic fibrosis Pneumonia, tuberculosis Smoking Aspiration of gastric contents	eLM ST HEP	WE OE TSR

Rheumatoid arthritis Systemic lupus erythematosus Antiphospholipid syndrome Vasculitis Connective tissue disorders	eLM ST HEP	WE OE TSR
Alcohol, tobacco Tranquilisers Opiates, amphetamines, cocaine and their derivatives, cannabi	eLM ST HEPWS(AC)	WE OE TS
Surgical stress, shock Wound infection and prophylaxis, wound care Thromboembolism prophylaxis Analgesic options General fluid management	eLM ST HEP	WE OE TSR
• Management after motor vehicle accident • Assault Major trauma		

B. Clinical Knowledge and Management Skills

Learning Outcomes:

Demonstrate clinical expertise in the management of pre-pregnancy, antenatal, intrapartum and postnatal care of the obstetric patient with low or moderate levels of complexity (CE 3.1.1.1).

Practise a multi-dimensional approach to patient management, by being able to (CE 3.1.1.3):

- **demonstrate advanced abilities in clinical reasoning and judgement and an ability to manage clinical situations**
- **work with other clinical specialties and services, and recognise current limits of medical expertise**
- **customise care according to the individual needs and wishes of women in their care, taking into account their personal beliefs, experiences, and social, economic and cultural background**
- **demonstrate diagnostic, therapeutic and surgical skills for the delivery of ethical and effective healthcare services (CE 3.1.1.4)**

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

:			
Medically assess and counsel a woman (and her partner) pre-pregnancy for: **appropriate lifestyle modifications conducive to favourable pregnancy outcomes, including advice regarding weight optimisation, diet, supplements, exercise, smoking and drug use**	**A.5.3-5 Genetics** **A.6.1 Drugs in pregnancy**	**eLM** **ST** **HEP**	**WE** **OE** **LB** **TSR**
pre-pregnancy screening and immunisation	**A.8.3 Haematology**		
risk of genetic conditions and referral for genetic counselling/carrier testing as appropriate **the impact and risk of pregnancy on medical conditions and vice versa** **perinatal anxiety and depression and pre-existing mental health conditions and counsel regarding medication** **the optimisation of medical conditions prior to conception**	**A.11 Medical and surgical conditions in pregnancy**		

:			
Provide comprehensive first-visit care, including: **routine assessment, including family and obstetric histories** **assessment of social and cultural factors that may impact on pregnancy care**	**C.1 Culture** **C.2 Ethics**	**eLM** **ST** **HEP**	**WE** **OE** **LB** **TSR**
assessment of risk category, including whether suitable for differing models of care			
participate in shared care with general practitioners and midwives if appropriate	**A.5.3-5 Genetics**		
counselling and recommending appropriate tests **1st and 2nd trimester screening for aneuploidies and neural tube defects** **carrier testing for monogenic conditions if family history or high risk population (including CF, SMA Tm (x)T588myS77(ati)1(nc91482**	**A.8.3 Haematology** **A.9 Microbiology**	**WS(U)**	**APSS**

:			
Clinical skills and gaining experience in ultrasound scanning: **By the end of Year 2 of the training program, trainees are expected to gain experience, know their limitations and know when to refer for the following areas of transabdominal and transvaginal ultrasonography:**	**A.7 Clinical imaging**	**eLM ST HEP WS(U)**	**WE OE LB TSR**
Practical aspects of ultrasound scanning **Machine settings required to optimise image** **Probe orientation and manipulation** **Systematic scanning approach to the examination** **Probe sterilisation and care of the machine** **Obstetrics** **Identify uterus, endometrium and cervix** **Identify an intrauterine pregnancy in the first trimester 6 weeks** **Recognise number of fetuses** **Measure gestation sac to obtain a MSD** **Measure CRL** **Recognize the presence/absence fetal heart motion using M-mode** **Determine presentation of pregnancy** **Measure deepest vertical pool** **Locate the placenta** **Report writing**			

:			
Locate the placenta **Report writing** **A further skills section for competencies required by end of Year 4 is under development.**			

A.2.2 Anatomy-pregnancy

Understand and demonstrate application of the principles of obstetric planning and case management in order to:

A.3.1-2 Fetal & placental

Identify, evaluate and manage a normal pregnancy

:			
Assess and manage common clinical problems that arise in pregnancy by demonstration of an understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of:	**A.7.1&3 Clinical imaging**	**eLM ST HEP**	**WE OE TSR LB**
Antenatal nausea, vomiting, abdominal and pelvic pain, abdominal mass, bleeding, discharge, fever, itch, rash, jaundice, genital lesions, diarrhoea, constipation, PR bleeding	**C.1 Culture A.2.2 Anatomy-pregnancy**		
Chest pain, cough, breathlessness, palpitations, fainting, collapse	**A.3.1 Fetal physiology**		
Urinary retention, loin pain, dysuria, haematuria, oedema, headache, hypertension, proteinuria, seizures	**A.5.3-4 Genetics**		
Breast pain, breast lump, galactorrhoea, mood and behavioural changes	**A.8.3-4 Haematology & biochemistry**		
Mobility problems, weight gain, weight loss Large and small for dates, reduced fetal movements	**A.10.3-4 Immunology**		

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technique and potential complications, including a detailed knowledge of the following procedures: cervical cerclage (evidence base, indications, application and complications) invasive fetal procedures amnioreduction adnexal surgery in a pregnant patient			

Understand and demonstrate application of the principles of obstetric planning and case management in order to: Perform and interpret fetal monitoring during labour: implement appropriate clinical interventions for fetal heart rate abnormalities.	A.7.1 Clinical imaging ultrasound	eLM ST HEP	WE OE TSR LB
Use and interpret tests of fetal well-being, underpinned by an understanding of test reliability	A.6.1 Drugs in pregnancy	FSEP	APSS
Assess and manage a normal labour and birth	A.2.2 Anaa.8sarJ	J /	

Be able to assess and manage common clinical problems that arise in the intrapartum period by demonstration of an understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of: **Intrapartum pain, labour after previous caesarean, uterine tenderness, non-reassuring fetal status, meconium liquor, abnormal CTG, abnormal progress haemorrhage, pyrexia, tachycardia, breathlessness, collapse, seizure, abnormal second stage**	**A.1.4 Epidemiological methods**	**WS(ALSO)** **WS(MOET)** **WS(PROMPT**	**APSS**
Assess and manage clinical conditions specific to the intrapartum period by demonstration of an understanding of the aetiology, pathogenesis, pathology, **x**			

	Caesarean Section including LSCS, repeat LSCS, and classical CS Complicated Caesarean Section, i.e. failed instrumental birth Visceral and vascular trauma sustained at CS Perimortem Caesarean Section Episiotomy and repair Repair of perineal, vaginal and cervical lacerations, including third and fourth degree tears Manual removal of placenta Management of maternal collapse		WS(ALSO) WS(MOET) WS(PROMPT eLM ST HEP	WE OE TSR APSS LB

Postpartum collapse

Assess and manage clinical conditions specific to the post-partum period by demonstration of an understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of the following conditions:

Perineal trauma (including perineal haematoma, 3rd and 4

Be able to provide and organise the routine care of a healthy neonate.

Assess and manage clinical conditions specific to the neonatal period by demonstration of an understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of the following conditions:

> **Aberrations of growth (growth restriction and macrosomia), prematurity, neonatal jaundice, respiratory distress, cardiac arrest, sepsis, birth asphyxia, birth trauma, common congenital and genetic anomalies, fetal alcohol syndrome, neonatal abstinence syndrome, the neonate of a diabetic mother, hypoxic ischaemic encephalopathy, necrotising enterocolitis, seizures, and babies exposed to maternal medication.**

Perform an immediate assessment of the newborn child and determine if resuscitative measures are indicated.

Resuscitate a newborn baby, including rapid clinical assessment of neonatal asphyxia, external cardiac compression of neonate, use of bag and mask ventilation and use of endotracheal adrenaline (Note: neonatal resuscitation is a logbook requirement for all Year 1 trainees).

Perform a routine neonatal assessment and be able to manage common problems found during this assessment.

Recognise

Learning Outcomes

Demonstrate clinical expertise pertaining to common and critically important gynaecological conditions (CE 3.1.1.2).

Practise a multi-dimensional approach to patient management, by being able to (CE 3.1.1.3):

demonstrate advanced abilities in clinical reasoning and judgement and an ability to manage clinical situations

recognise current limits of medical expertise

Provide diagnostic, therapeutic and surgical skills for ethical and effective healthcare by being able to (CE 3.1.1.4):

access, interpret and apply knowledge relevant to clinical practice in gynaecology

demonstrate an appropriate awareness of the impact on health and well-being of emotional and social issues

demonstrate effective services in consultation, management, clinical education and legal opinion in regard to the we (CE

Appropriate knowledge of cervical pathology including the principles and practice of colposcopy Understand principles of a paediatric gynaecological examination			
	A.4.3 Physiology repro years		
Demonstrate an understanding of and an ability to assess and initiate management of:	A.5.3&5 Genetics		
Pre-pubertal vaginal discharge and bleeding			
Congenital anomalies of the genital tract			
Disorders of puberty (see reproductive endocrinology)	A.4.3 Physiology repro years		
Menstrual disorders in adolescents (irregular or heavy bleeding, amenorrhoea)	A.6.2 Pharmacology & therapeutics		
Paediatric and adolescent tumours of the genital tract			
Adolescent sexual issues including high risk behaviour, contraception, STIs, HPV vaccination			
Suspected adolescent or child sexual abuse	n2 Tf 401931 .0		

Demonstrate a contemporary evidence-based knowledge and understanding of the aetiology, pathogenesis, pathology, epidemiology, clinical presentation, investigation, management and prognosis of infections in the upper and lower genital tract in order to:

- **Perform cervical screening tests, opportunistic screening for sexually transmitted infections and HPV vaccination**
- **Diagnose and manage sexually transmitted genital tract infections and infections of the upper and lower genital tracts**

Obtain legal consent from an incompetent patient

Sensitively and appropriately manage a patient with a psychological or psychiatric disorder or substance abuse problem

Recognise common indicators that a patient has suffered sexual assault

Respond appropriately to a patient who discloses sexual assault

Provide appropriate counselling and referrals to a victim of sexual assault

Recognise common indicators that a patient has suffered domestic violence

Respond appropriately to a patient who discloses domestic violence

Provide appropriate counselling and referral to a victim of domestic violence

Understand the principles of a forensic examination and how to write a forensic report

Assess and manage a woman with premenstrual syndrome and dysphoric disorder (PMDD)

Assess the i

Demonstrate a detailed knowledge of the following gynaecological operations:

- **Surgical management of miscarriage and abortion**
- **Surgical treatment of ectopic pregnancy**
- **Surgical management of molar pregnancy**
- **Diagnostic hysteroscopy**
- **Operative hysteroscopy**
- **Sterilisation procedures**
- **Diagnostic laparoscopy**

(Applicable to both gynaecological and obstetric surgery)

Learning Outcomes:

Demonstrate medical expertise in core areas of surgical procedure and care (CE 3.1.2).
Demonstrate medical expertise in core areas of obstetric and gynaecological care (CE 3.1.1).
Demonstrate pre, intra and postoperative use of Surgical Safety checklists (CE 3.1.2).

*** Refer to page 17 for Teaching and Learning Strategies, and Assessment key**

Prepare a specific patient for a specific operation by being able to: **Conduct a pre-operative assessment including appropriate surgical procedure for the clinical problem** **Demonstrate knowledge of risks, outcomes, alternatives, potential complications and their incidence** **Perform a pre-operative anaesthetic assessment** **Assess for risk of thromboembolism and understand the principles of thromboembolism prophylaxis** **Ensure understanding and obtain specific informed consent, including consent for audit, research and new procedures where appropriate** **Assessment of acuity, including intra-abdominal bleeding, resuscitation of the haemodynamically compromised patient (principles of surgical triage)** **Ensure that correct instruments, equipment and suture material are available**	**B.2.2 Gyn surgery**	**eLM ST HEP**	**WE TS APSS**

Manage a needle-stick injury **Apply surgical principles to prevent adhesions during surgery** **Demonstrate dissection of proper fascial planes in repair surgery** **Manage fluid and electrolyte balance** **Manage intravenous therapy, including use of blood and blood products** **Recognise injuries to the ureter, including those which become apparent postoperatively** **Recognise bladder and bowel trauma, including those which become apparent postoperatively and undertake appropriate management** **Insert a suprapubic catheter**	**A.2.1** **Descriptive**	**WS(AC)**	

The following table lists the procedures and skill levels expected of all trainees by the end of the designated year level of the Basic and Advanced Training Program.

By the end of Year 2 of Basic Training, all trainees are required to undertake assessment of competency in the core operative skills and procedures marked with a red asterisk (*) in the Basic Training column. By the end of Year 5 of the FRANZCOG training program, trainees must undertake assessment of competency in the skills and procedures marked with a red asterisk* in the Advanced Training column.

Minimum numbers required for the procedures listed are detailed in the FRANZCOG Training Program Handbook and the FRANZCOG Logbook.

	By end of Year 2*	By end of Year 5*
Diagnostic hysteroscopy, dilatation and curettage (D&C)	X*	X
Suction D&C for retained products of conception	X*	X
Endometrial ablation	XX	X*
Laparoscopic surgery, RANZCOG/AGES Skill levels 1-2#	X*	X
Laparoscopic surgery, RANZCOG/AGES Skill level 3 #	X	X*
Laparotomy: Basic e.g. oophorectomy, salpingo-oophorectomy, ovarian cystectomy	X*	X
Laparotomy: Intermediate e.g. hysterectomy, myomectomy, hysterotomy	XX	X*

	By end of Year 2

The following table lists the skill levels and competencies expected of trainees by the end of Basic Training and by the end of Advanced Training.

All trainees are required to undertake Assessment of Procedural and Surgical Skills in all of the procedures listed in the table below which are marked with a red asterisk*. These assessments must be completed by the end of the S) workplace-based assessment form.

Advanced Training Modules (for trainees who commenced on or after 1 Dec 2013) include: E = Essential O & G Skills; G = Generalist; P = Pelvic floor Disorders; HL = Hysteroscopic & Laparoscopic Surgery; SRH = Sexual and Reproductive Health

Minimum numbers required for the procedures listed are detailed in the FRANZCOG Training Program Handbook.

Cystoscopy	X* (Yr 4)	G, P
Vaginal surgery: Basic e.g. vaginal repair: anterior +/or posterior repair & perineum	X* (Yr 4)	E, G, P
Vaginal surgery: Intermediate e.g. Hysterectomy	X* (Yr 4)	G, P
Surgical procedures for post hysterectomy vault prolapse		P
Surgical proceedures for urinary stress incontinence	XX	G, P
Colposcopy, cervix and CIN management (assessed by APSS)	APSS	G
Vulval biopsy (diagnostic)	X* (Yr 4)	G
Cone biopsy	XX	G
Minor perineal surgery (eg, excision vulval cyst)	X* (Yr 1)	G

 # See College Statement C-Trg 2 for laparoscopic surgery procedures and requirements for RANZCOG/AGES Skill Levels

X Perform with minimal input **XX Perform with significant input**

Management of cervical insufficiency	XX	G

Caesarean section: Basic	**X* (Yr 2)**	**E, G**
Complicated Caesarean section: fully dilated	**X* (Yr 4)**	**E, G**

Understand and respect the ways in which culture and religion impact on

Learning Outcomes:

Exhibit ethical attitudes and conduct to (PQ 3.3.4.1-4):

- **Deliver the highest quality healthcare with integrity, honesty and compassion**
- **Practise medicine that is ethically responsible and consistent with the obligations of a self-regulating profession**
- **Recognise a duty to assist in an emergency situation**
- **Recognise patient autonomy and legal and moral duties to women in their care**

*** Refer to page 20 for Teaching and Learning Strategies, and Assessment key**

Be familiar with the RANZCOG Code of Ethics and its framework for practice in obstetrics and gynaecology
Be familiar with the concepts of Beneficence, Non-maleficence, Autonomy, Justice, Dignity and Truthfulness in the application of medical ethical principles
Understand the nature of ethical thinking and the philosophical basis of ethics
Be able to frame an ethical argument
Be able to discuss specific issues on the basis of ethical considerations, including:

- **Blood-borne and sexually transmitted infections**

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Learning Outcomes:

Exhibit ethical attitudes and conduct to recognise duties in regard to courts, legislative and regulatory bodies, and notification obligations (PQ 3.3.4.5).

*** Refer to page 20 for Teaching and Learning Strategies, and Assessment key**

Be able to describe: **The development of duty of care in common law** **Contemporary understanding of the duty of care in medicine** **Breach of duty of care/standard of care** **Causation** **Important cases in the development of the duty of care a doctor owes to a patient** **How the courts can change what is understood by the duty of care** **Gaining consent** **The reasons why patients sue for breach of duty of care** **How to communicate with patients who have lodged a claim**	**eLM** **ST** **HEP**	**TSR** **WE** **OE**
Understand: **The powers and limitations of the regulatory bodies** **The public policy reasons for the existence of the regulatory bodies** **How to respond to requests from the regulatory bodies**		
Know: **The name of the health complaints body in the relevant jurisdiction and the role of that body** **How to respond to complaints and use complaints to improve practice**		
Understand the principles and benefits of conciliation.	**eLM** **ST**	

Learning Outcomes:

Learn independently (AA 3.2.1).

Teach and communicate effectively (AA 3.2.2).

Provide effective team management and leadership in the workplace (PQ 3.3.1).

- **Understand and implement basic human resources principles and staff management, and business and financial management.**
- **Practise efficient and effective administrative skills, including time management.**
- **Work collaboratively with other health care providers.**

Review of professional practice (PQ 3.3.2).

- **Understand the principles, and participate in the practice of, clinical governance.**
- **Actively engage in practise of risk management/ minimisation by addressing and advocating safety and quality in healthcare practices.**

Demonstrate commitment to the best interests of the patient and the profession by (PQ 3.3.5.1):

- **Acting as health advocate for the patient.**
- **Allocating finite health resources prudently.**
- **Using time and resources to balance patient care, learning needs and lifestyle.**

Contributing to the health of women and the fetus and development of the profession of Obstetrics and Gynaecology by (PQ 3.3.5.2):

Understand the basic principles of human resource management.	**ST**	
Develop skills in staff recruitment, including:		
Identification of skills and attributes required.		
Planning and conducting of interviews.		
Understand and apply principles of good staff supervision, including:		
Listening and communicating		
Clarity of goal-setting and required standards		
Fairness and consistency		
Staff motivation		
Understand how to counsel staff and manage conflict resolution.		
Advocate on behalf of staff.		
Knowledge of legal obligations in relation to employees, including:		
Good communication		
Defining individual responsibility		
Collective goal setting		
Providing opportunities for contribution of all team members		**WE** **TSR**
Understand importance of information technology aids to administrative function.	**ST** **HEP**	
Establish:		
systems to create, store and archive records effectively		
reliable systems to ensure appropriate follow-up of consultations and investigations		
Understand:	**WS(PP)**	
the need for accountability and its relationship to registration		
the role of the relevant medical board and healthcare complaints body in your jurisdiction		
the roles of the RANZCOG.		
Use continuing professional development programs to aid in practice improvement and service improvement.		**TSR**
Understand the principles and importance of time management, in particular:	**ST** **HEP**	
Good diary keeping		
Using checklists		
Setting deadlines and goals		

Prioritising non-clinical duties

5.2.1 In-training assessments

Trainees are required to complete a range of in-training assessments, both formative and summative, conducted by themselves, their Training Supervisors and other consultants with whom they work closely throughout their training.

Surgical skills: Surgical requirements as outlined in the Logbook and the criteria identified on Assessment of Procedural and Surgical Skills (APSS) forms and by the scope and level required for practice in the specialty	3-monthly review of Logbook Assessment of Procedural and Surgical Skills (APSS) form to be submitted no later than the final 6-monthly summative assessment report for the relevant year level.	Training Supervisor RANZCOG Fellow Advanced Trainee (for procedures that must be signed off by Years 1 & 2) Senior Midwife (spontaneous vaginal birth assessment)
Procedural skills: Procedural requirements as outlined in the Logbook and the criteria identified on Assessment of Procedural and Surgical Skills forms by the scope and level required for practice in the specialty	3-monthly review of Logbook Criterion-based rating through direct observation during clinic sessions	APSS-approved assessors

Trainees are required to actively participate in workshops assessing a number of surgical and procedural skills. These workshops may be conducted within the training hospital or by external organisations.

(1) Surgical skills*	**Satisfactory completion of the Foundations of Surgery Workshop by the end of Year 1.**	**Consultants and Senior Trainees**
(2) Obstetric Skills	**Satisfactory completion of the Basic Obstetric Skills Workshop by the end of Year 1.**	**Consultants and Senior Trainees**
(3) Neonatal resuscitation	**Satisfactory completion of an approved workshop by the end of Year 1**	**Workshop or course faculty**
(4) Communication skills	**Satisfactory completion of an approved workshop by the end of Year 1 or 2**	**Workshop or course faculty**
(5) Fetal surveillance workshop**	**Satisfactory completion of an approved workshop or course by the end of Year 1**	**Workshop or course faculty**
(6) Ultrasound	**Satisfactory completion of an approved workshop or course by the end of Year 2**	**Workshop or course faculty**

This training is designed to equip trainees with basic surgical skills, which are only briefly taught in undergraduate curricula. This is to ensure trainees get appropriate time to practise techniques, work with various surgical models and assemble equipment without any of the time constraints usually present in theatre.

5.2.3 Examinations

Possession of knowledge, understanding and application of knowledge in obstetrics and gynaecology, as outlined in Section 4.	Paper 1: Short answer questions Paper 2: Multiple choice questions Passing score set by rigorous standard-setting process.	Accredited, trained RANZCOG examiners

(1) Demonstration of clinical abilities including: Clinical management History taking Communication requirements Problem solving Resources utilisation Time management and prioritisation of tasks (2) Possession of knowledge and8(		

5.2.4 Research

The experience of engaging in a research project is arguably one of the best learning opportunities available to trainees during the years of postgraduate study. It affords the privilege of developing a learning project on the basis of professional interests and aptitudes, to progress the project over a sustained period of time, to achieve some work that can be classed as original and to publish a report of the findings of the study.

Involvement in and completion of a research study during FRANZCOG training will enable trainees to meet the objectives outlined in 3.2 Academic Abilities; objectives that are designed to develop the academic abilities needed for successful practice as an obstetrician and gynaecologist. Development of these abilities during postgraduate study will provide a solid foundation for further learning and a head start in the practice of continuing professional development.

The College supports the research project through the provision of comprehensive online Research Modules. Additionally, in its process of accrediting training positions, the College requires that specified protected time and support is provided within each ITP to enable fulfilment of the requirements of the research project.

Completion of research to a standard that would be accepted by a peer-reviewed journal or to a standard deemed appropriate by a College-appointed assessment committee and in accordance with